


**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

		Application Number	10/807,820
		Filing Date	03/24/2004
		First Named Inventor	Brown
		Art Unit	1744
		Examiner Name	G. Graham
Total Number of Pages in This Submission	13	Attorney Docket Number	RB-0110

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply 2	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Robert C. Brown
Signature	<i>Robert C. Brown</i>
Date	November 29, 2004

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Robert C. Brown
Signature	<i>Robert C. Brown</i>
	Date Nov. 29, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
PATENT EXAMINING OPERATION

Applicant: R. Brown  
Serial Number: 10/807,820  
Filing Date: 03/24/2004  
Title: LINEAR-TRACKING WINDSHIELD WIPER SYSTEM  
FOR WIPPING A RECTANGULAR FIELD  
Examiner: G. Graham, Art Unit 1744  
Attorney Docket No.: RB-0110

TO THE HONORABLE COMMISSIONER OF PATENTS AND TRADEMARKS  
P.O Box 1450  
Alexandria, VA 22313-1450

**RESPONSE TO NOTICE OF NON-COMPLIANT AMENDMENT**

This is in response to a Notice of Non-Compliant Amendment dated 11/24/2004.

In complying with a requirement for Restriction dated 09/14/2004, Applicant inadvertently presented on 11/12/2004 only the elected original Claims 1 and 11-18, and failed to show the text of withdrawn Claims 2-10 and 19-31. Accordingly, a corrected reply and listing of claims is attached, showing the status and text of all Claims 1-31.

Kindly substitute the corrected reply for the reply submitted on 11/12/2004.

Respectfully submitted,

A handwritten signature in cursive ink that reads "Robert C. Brown".

Robert C. Brown, Agent for Applicant  
1207 Sandhurst Drive  
Tallahassee, Florida 32312  
850-385-9456



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**INTRODUCTORY COMMENTS**

This is in response to an Office Action dated 09/14/2004.

Claims 1 through 31 in accordance with the elected  
Restriction begin on page 2.

Remarks begin on page 11.